



BOSEMCKINNEY & EVANS LLP

CUSTOMER NUMBER: 25267

2700 First Indiana Plaza
135 North Pennsylvania Street
Indianapolis, Indiana 46204

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Atty. Docket: 8266-0738 }
Applicant(s): Borders et al. }
Title: COMMUNICATION AND }
DATA ENTRY DEVICE }
Serial No.: 10/039,342 }
Filed: November 19, 2001 }
Examiner: Tong, N. }
Group: 2632 }

Certificate Under 37 C.F.R. § 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

on June 16, 2004

Brenda Vandever
Brenda Vandever

Dated: June 16, 2004

RECEIVED

JUN 28 2004

Technology Center 2600

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Final Office Action of April 21, 2004 ("Office Action"), please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Amendments to the Specification begin on page 8 of this paper.

Amendments to the Drawings begin on page 10 of this paper.

Remarks begin on page 11 of this paper.



BOSE MCKINNEY & EVANS LLP

JUN 18 2004

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AF2632

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Serial No.: 10/039,342

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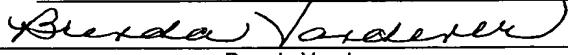
Title: COMMUNICATION AND DATA
ENTRY DEVICE

Group: 2632 Examiner: Tong, N.

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Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a response in the above-identified application:

The fee has been calculated as shown below:

CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS (37 C.F.R. 1.16(c))	33	57	0	\$18	\$0
INDEPENDENT CLAIMS (37 C.F.R. 1.16(b))	7	11	0	\$86	\$0
If applicant has small entity status under 37 C.F.R 1.9 and 1.27, then divide total fee by 2, and enter amount here.			SIMALL ENTITY TOTAL	NO	\$0
TOTAL FEE FOR ADDITIONAL CLAIMS					\$0

*If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

**If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

An Extension of Time for _____ month(s) is hereby requested under
37 C.F.R. 1.136(a). The required fee for filing this extension is: _____

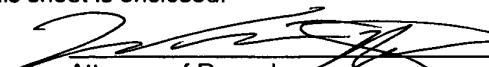
Information Disclosure Statement _____

TOTAL FEE FOR THIS AMENDMENT

\$0

A check in the amount of \$ _____ to cover the total fee for this
amendment is attached.

The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees under 37 C.F.R. 1.17 which may be required during the prosecution of this application, or credit of any overpayment, to Bose McKinney & Evans LLP's Deposit Account No. 02-3223. A duplicate copy of this sheet is enclosed.


Attorney of Record
Printed Name: William S. Meyers
Registration No. 42,884

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